



Hofstra Northwell School of Medicine

***Application for IRB Review of Educational Research***

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Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

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Title of Research: \_\_\_\_\_

Purpose of Research (150 words or less):

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Type of Review Requested:       Exemption \*       Expedited \*       Full

\*Justification for Exemption or Expedited Review:

\* When requesting exemption or an expedited review, please refer to the Office of Health and Human Services decision charts at:  
<http://www.hhs.gov/ohrp/policy/checklists/decisioncharts.html>

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I certify that I have read the Belmont Report on Ethical Principles and Guidelines for the Protection of Human Subjects of Research found at:  
<http://www.hhs.gov/ohrp/humansubjects/guidance/belmont.html>

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ATTACHMENTS:**

The Institutional Review Board Requires:

1. An abstract (150 words or less)
2. Names and roles of research participants
3. A complete methods section including any surveys, instruments, or protocols to be used (3 page limit plus instruments)
4. A copy of the Informed Consent Form to be used